Case 16-01105 Doc 4 Filed 01/14/16 Entered 01/14/16 14:14:29 Desc Main Document Page 1 of 2

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Fill in this information to identify your case:			
Debtor 1 Marchart Middle Name	JAM SHI		
Debtor 2			
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the:	District of(St		
Case number (If known)	THE PARTY OF THE P		
Official Form 103A		Check if this is a amended filing	₽N
	als to Pav the	e Filing Fee in Installments 12/19	5
Be as complete and accurate as possible. If two		together, both are equally responsible for supplying correct	-
information.			
Part 1: Specify Your Proposed Payme	nt Timetable	FIFE	
		UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS	
 Which chapter of the Bankruptcy Code are you choosing to file under? 	Chapter 7	NORTHERN DISTRICT OF ILLINOIS	
	☐ Chapter 11 ☐ Chapter 12		
	Chapter 13	JAN 1 4 2016	
	Chapter 15	JESEDEV D. ALL DOWN	
You may apply to pay the filing fee in up to four installments. Fill in the amounts you propose to pay and the dates you plan to	You propose to pay	JEFFREY P. ALLSTEADT, CLERK PS REP CA	
pay them. Be sure all dates are business days. Then add the payments you propose to pay.	\$ 770 50	With the filing of the petition On or before this date	
You must propose to pay the entire fee no later than 120 days after you file this bankruptcy case. If the court approves your application, the court will set your final	\$ 77.50	On or before this date	
payment timetable.	\$ 77,8	On or before this date	
	+\$77.59	On or before this date	
Total	\$ <u>3/6</u>	◀ Your total must equal the entire fee for the chapter you checked in line	1.
Part 2: Sign Below			
By signing here, you state that you are unable understand that:	to pay the full filing fee a	it once, that you want to pay the fee in installments, and that you	
You must pay your entire filing fee before you preparer, or anyone else for services in conn		s or transfer any more property to an attorney, bankruptcy petition	
) days after you first file for	bankruptcy, unless the court later extends your deadline. Your	
If you do not make any payment when it is do	•	nay be dismissed, and your rights in other bankruptcy proceedings	
may be affected.			
Signature of Debtor 1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/	Signature of Debtor 2	Your attorney's name and signature, if you used one	
Date O/14 Loll	Date MM / DD / YYYY	Date MM / DD / YYYY	

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or 2 ise, if filing) First	Name A	Middle Name Last	Name				
number	ruptcy Court for the:	Dist	rict of(State)				
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		yment of Fi					***************************************
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additional property to an attorney or to anyone else for services in connection with this case.

	By the court:	
Month / day / year		United States Bankruptcy Judge